| FOR INSTRUCTIONS, SEE BACK OF FORM | FORM DR-2 DISCLOSURE |
|--|---|
| DISCLOSURE SUMMARY PAGE | (Rev. 01/98) REPORT |
| DIOCEOUS TO THE PARTY OF THE PA | For Office Use Only |
| OMMITTEE NAME (Must be same as on Statement of Organization) | Comm.# |
| Sociesa County Democratic Central Committee | Indexed a |
| actura county control control | Audited |
| IMPORTANT: Indicate type of committee you are reporting for: | Computer |
| (1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support State of Candidates | |
| SIGNATURE OF TREASURER (or person filing this report) TELEPHONE | DATE SIGNED |
| Routine Penalties Due For Late Filed Reports Range from | m \$20 to \$400 |
| SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE: | |
| (report date) REPORT FOR AN/A (1) ELECT | ION /(2)NON-ELECTION YEAR. ate one |
| □CHECK IF AMENDMENT TO REPORT DATED | cal Committees, enter Date of Election |
| Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a Notice of Dissolution is filed.) | unty & Local Committees, enter County in ich Election is held |
| STATEMENT OF CASH ON HAND | |
| CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.) | \$ <u>875.</u> 93 |
| ADD TOTAL MONEY TAKEN IN THIS PERIOD | |
| Schedule A: Cash Contributions total (Attach Schedule A) | <u>9</u> 76.00 |
| Schedule F: Loans Received total (Attach Schedule F) | |
| Schedule H: Total Sales of Campaign Property (Attach Schedule H) | |
| (Schedule H applies to Candidates' Committees Cnly) | |
| | \$ <u>949.93</u> |
| SUBTRACT TOTAL MONEY SPENT THIS PERIOD | |
| Schedule B: Expenditures total (Attach Schedule B) | <u>\$176.50</u> |
| Schedule F: Loan Repayments total (Attach Schedule F) | |
| CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) | |
| | |
| UNPAID BILLS (From Schedule D - Attach Schedule D) | \$ |
| IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) | |

QUTSTANDING LOANS (From Schedule F - Attach Schedule F)\$

____ YES ____ NO

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

| For Instructions, See Back of Form CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds) COMMITTEE NAME (Must be same as on Statement of Organization) | | | SCHEDU | JLE | |
|---|---|---|--|--------------------|---------|
| | | | (Rev. 06 | MONET (97) RECE | |
| | | | . 0 | CHECK THIS BOX IF | |
| Louisa | County Dem | ocratic Central Committee | | | |
| | PAC CHECK NUMBER IN TH | TION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION E DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAIL | | | |
| | | de, prohibits the use of information copied from report nother than statutory political committees. | s and statements for sol | iciting contribut | ions or |
| DATE RECEIVED (MM/DD/YR) | PAC ID NUMBER (if applicable) AND PAC CHECK | NAME AND ADDRESS OF CONTRIBUTOR | RELATIONSHIP TO CANDIDATE* (if applicable) | AMOUNT RECEIVED | V IF |

| DATE RECEIVED (MM/DD/YR) | PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS OF CONTRIBUTOR | RELATIONSHIP TO CANDIDATE* (if applicable) | AMOUNT RECEIVED | √ IF FOR FUND- RAISER INCOME |
|--------------------------------|---|---------------------------------|--|--------------------|---------------------------------------|
| roleolvo | ID# CK# | Uniternized contributions | | \$76.00 | / |
| | ID# | | | | |
| | CK# | | | | |
| - | ID# | | | | |
| | CK# | | | | |
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| | ID# | | | | |
| | CK# | | | | |
| | | <u> </u> | SUB-TOTAL | | |

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page ____ of ___

\$76.00

TOTAL (if last page of this

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

TE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

| SCHEDULE B (Rev. 09/97) | MONETARY EXPENDITURES |
|-------------------------------|--------------------------|
| | CK THIS BOX IF |

| | | same as on Statement of Organization) Lemocratic Central Co | mittle | |
|--------------------------------|--|--|-----------------------------------|--------------------|
| DATE EXPENDED (MM/DD/YR) | CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER | NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE | PURPOSE (DESCRIBE TRANSACTION) | AMOUNT EXPENDED |
| rolpolro | ID# CK# 319 | Louisa County Fair Board | Donatión | \$1000 |
| דסלבולדם | CK# 320 | Louise County Fair Board | Tickets for vides Office | * 45 °° |
| rolaeki | CK#3シi | Columbus Gazette | Caucus advirtising | 431.50 |
| • | ID# CK# | | | |
| | ID# | | | |

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

penditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

| Page | l of | <u> </u> |
|------|------|----------|
|------|------|----------|

SUB-TOTAL

TOTAL (if last page of this schedule)

\$176.50